FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL 3235-0076 OMB Number: Expires:

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April 30, 2008

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1395977

NOTICE OF SALE OF SECURITIES R 0 4 2007 PURSUANT TO REGULATION **SECTION 4(6), AND/OR**

UNIFORM LIMITED OFFERING EXEM

SEC USE ONLY DATA RECEIVED

Name of Offering (check if this is a	ess Group, Inc Common Stock Section Common Stock				, i
Infinity Business Group, Inc Com	mon Stock				
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 50.	5 🛛 Rule 506	Section 4(6)	ULOE	
Type of Filing: New Filing	Amendment				*
	A. BASIC	IDENTIFICATIO	ON DATA		
1. Enter the information requested about t	he issuer				T TATAN BOWN TAIN BOWN FRATA UPON TATAN BURGA (TAIN)
Name of Issuer (check if this is a	n amendment and name has changed	, and indicate chang	ge.)		07049753
Infinity Business Group, Inc.					
Address of Executive Offices	(Number and Str	eet, City, State, Zip	Code)	Telephon	e Number (Including Area Code)
1240 Gibson Road, Suite B Lexington, SC 29072				(803) 957-035	50
Address of Principal Business Operations (if different from Executive Offices)	(Number and Str	reet, City, State, Zip	Code)	Telephon	e Number (Including Area Code)
				any with a focus	on the processing and collection of PROCESSED
Type of Business Organization					
corporation	limited partnership, alread	y formed	other (ple	ase specify:	100 1 0 ccc
☐ business trust	☐ limited partnership, to be f	formed			APR 1 0 2007
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organizati		vice Abbreviation t		nated N	THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are required to respond unless the form displays a currently valid OMB control number.

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SEC 1972(5-05)

***		, A. BASIC	DIDENTIFICATION			·,•••	9 :
2. Enter the information r	equested for the fo	ollowing:					
• Each promoter of	the issuer, if the is	ssuer has been organized wil	hin the past five years:			;	
		wer to vote or dispose, or dire	-			es of the issue	r;
 Each executive of 	fficer and director	of corporate issuers and of c	orporate general and mar	naging partners o	f partnership issuers; and		
Each general and	managing partner	of partnership issuers.				• ,	•
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner	•	·
Full Name (Last name first, i Sturgill, Bryon	f individual)			,			
Business or Residence Addre 117 Caroline Avenue, Pi							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner		- ;
Full Name (Last name first, i Cordell, Wade B.	f individual)		• •			,	
Business or Residence Addre 1240 Gibson Road, Suite							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, i Hargrett, Haines	f individual)				· ·		
Business or Residence Addre 1240 Gibson Road, Suite	•		<i>:</i>				
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	•)
Full Name (Last name first, i Cordell, O. Bradshaw	f individual)	- , <u>- , - , - , - , - , - , - , - , - ,</u>					
Business or Residence Addre 1240 Gibson Road, Suite						•	:
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☑ Director	General and/or Managing Partner		
Full Name (Last name first, i Blevins, John F.	f individual)			•			,
Business or Residence Addre 1240 Gibson Road, Suite							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner		•
Full Name (Last name first, i VanHoeven, William	f individual)			-			
Business or Residence Addre 1240 Gibson Road, Suite					<u> </u>		
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner	7	(
Full Name (Last name first, it Potter, Michael	f individual)						il
Business or Residence Addre 1240 Gibson Road, Suite						•	,

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Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner	• 1
Full Name (Last name first, i	if individual)		;·			
Business or Residence Addre	ess (Number and S	treet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name first, i	if individual)					
Business or Residence Addre	ess (Number and S	treet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, i	f individual)		 			
Business or Residence Addre	ess (Number and S	treet, City, State, Zip Code)			Þ
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	•
Full Name (Last name first, i	f individual)					
Business or Residence Addre	ess (Number and S	treet, City, State, Zip Code))			
	<u> </u>	· · · · · · · · · · · · · · · · · · ·				

				B. i	INFORMA	HON ABO	MODER	ING				4
1. Has the iss			:_aa_	!! 4				,			Yes	No ⊠
i. Has the iss	uer solu, or c	ioes uie issu	er intend to		o in Append		-			***************************************	⊔	
2. What is the	· minimum i	nvestment th	at will be a		• • •		_				\$	6,000.00
2. What is the	, 1111111111111111111111111111111111111	ivesument u	at will be at	ocpica non	il daily intolvic			***************	***************************************		•	
3. Does the o												N₀ □
person or a than five (5	on for solicit gent of a bro	ation of pure ker or deale be listed are	chasers in co r registered	onnection w with the SE	ith sales of s C and/or wit	ecurities in the a state or s	the offering. states, list th	If a person e name of th	to be listed te broker or	ission or simil is an associate dealer. If mos that broker of	ed re	
Full Name (La	ast name firs	t, if individu	al)		·							
Business or Re	esidence Ado	dress (Numb	er and Stree	t, City, Stat	e, Zip Code)	 						
Name of Asso	ciated Broke	r or Dealer					* UN					
States in Which	th Person Lis	ited Has Sol	icited or Inte	ends to Soli	cit Purchaser	rs	•				,	
(Check "A	All States" or	check indiv	idual States	(Individua	l States Ma	rked By Th	e Symbol "	'")			🔲 Ai	Il States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
1L	ĪN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	ИJ	NM	NY	NC	ND	ОН	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	[VA]	WA	WV	WI	WY	PR
Full Name (La	ist name first	t, if individu	al)						•			
Business or Re	esidence Add	iress (Numb	er and Stree	t, City, State	e, Zip Code)	l						
Name of Asso	ciated Broke	r or Dealer								•		
States in Which	h Person Lis	ted Has Soli	icited or Inte	ends to Solic	cit Purchaser	<u></u>						
(Check "A	All States" or	check indiv	idual States)							. 🗆 Al	Il States
AL	ÄK	AZ	AR	CA	CO	CT	DE	DC	FL	ĞĀ	HI	[ID]
IL	ĪN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name (La	ist name first	, if individu	al)		,							
Business or Re	esidence Add	iress (Numb	er and Stree	t, City, State	e, Zip Code)	•						
Name of Asso	ciated Broke	r or Dealer									HBI 3-1-1-	-
States in Whic	h Person Lis	ted Has Soli	cited or Inte	ends to Solid	it Purchaser	'S						• • • • • • • • • • • • • • • • • • • •
(Check "A	All States" or	check indiv	idual States)			****************				. 🗆 АІ	Il States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
IL	ĪN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

C. OTETETING PRICE, NUMBER OF INVESTORS, (EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	0	_ \$	0
	Equity - Common Stock and Preferred Stock	841,250.00	_ \$_	841,250.00
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)		_ \$_	0
	Partnership Interest		_ s	0
	Other (Specify)	0	_ \$_	0
	Total\$		_ s	841,250.00
	Answer also in Appendix, Column 3, if filing under ULOE.		_	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number of		Aggregate Dollar Amount
	•	Investors		of Purchases
	Accredited Investors	20	_ s	841,250
	Non-accredited Investors	0	_ \$_	0
	Total (for filings under Rule 504 only)	N/A	_ s	N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	Type of		Dollar Amount
	Type of Offering	Security		Sold
	Rule 505	N/A	_ \$_	N/A
	Regulation A	N/A	_ \$_	N/A
	Rule 504	N/A	_ \$	N/A
	Total	N/A	_ \$_	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not know, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		s	N/A
	Printing and Engraving Costs		\$	N/A
	Legal Fees	⊠	s	\$100,000.00
	Accounting Fees	\boxtimes	s	50,000.00
	Engineering Fees		\$	N/A
	Sales Commissions (specify finders' fees separately)		\$	N/A
	Other Expenses (Identify) Blue Sky Filing Fees	⋈	s	2,000.00
	Total	⊠	s	152,000.00

C. OFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

and total expenses furnished in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		5	<u>-</u>	689,250.00	
icate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for h of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the to the left of the estimate. The total of the payments listed must equal the adjusted gross ceeds to the issuer set forth in response to Part C — Question 4.b above.					
	Di	nyments to Officers, irectors, & Affiliates		Payments Others	to
Salaries and fees] \$_			\$	
Purchase of real estate	S]	\$,
Purchase, rental or leasing and installation of machinery and equipment] \$			s	
Construction or leasing of plant buildings and facilities] \$_			\$	
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)] \$	Ε		\$	
Repayment of indebtedness]	\$	
Working capital] \$		3	\$ 189,2	250.00
Other (specify): Repurchase Outstanding Securities] \$_		3	\$ 500,0	00,00
Column Totals]	6.00	3	\$ 689,2	250.00
Total Payments Listed (column totals added)		⊠ \$ <u>689,2</u>	50.	.00	*

	TOTAL TO	T-1-1-1		1 1 7 1 7 1	
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The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)
Infinity Business Group, Inc.
Signature

Date February 28, 2007

Name of Signer (Print or Type)

John F. Blevins, Esq.

Title of Signer (Print or Type)
Corporate Counsel

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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ATTENTION

٥		E STATESTONATURE	<u></u>							
1.	Is any party described in 17 CFR 230.262 provisions of such rule?	Yes No □ ⊠								
		See Appendix, Column 5, for state response.								
2.	The undersigned issuer hereby undertake D (17 CFR 239.500) at such times as require	s to furnish to any state administrator of any state ed by state law.	e in which this notice is filed, a notice on Form							
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	limited Offering Exemption (ULOE) of	the issuer is familiar with the conditions that re the state in which this notice is filed and und hing that these conditions have been satisfied.	must be satisfied to be entitled to the Uniform lerstands that the issuer claiming the availability							
	er has read this notification and knows the orized person.	e contents to be true and has duly caused this not	tice to be signed on its behalf by the undersigned							
•	Print or Type) Business Group, Inc.	Signature Signature	Date February 2, 2007							
Name o	f Signer (Print or Type)	Title of Signer (Print or Type)								
John F.	Blevins, Esq.	Corporate Counsel								

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	0 ,			ARRE	NDIX				jı	
1	Intend to non-ac investors (Part B-	to sell credited in State	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL					-					
AK				<u>.</u>					-	
AZ										
AR										
CA		X	\$841,250.00	1	\$60,000.00	0	0		X	
СО										
СТ										
DE										
DC										
FL				_						
GA		X	\$841,250.00	4	\$175,000.00	0	0		x	
ні										
ID				-						
IL										
ΙN			· · · · · · · · · · · · · · · · · · ·						k .	
IA										
KS					,					
KY		x	\$841,250.00	7	\$271,250.00	0	0		Х	
LA		X	\$841,250.00	1 .	\$50,000.00	0	· 0		х	
ME				,						
MD		X	\$841,250.00	1	\$10,000.00	0	0		x	
MA							1			
MI										
MN				· · · · · · · · · · · · · · · · · · ·						
MS										

,				APPE	NDIX		-		• ,
1	Intend t to non-acc investors (Part B-I	o sell credited in State	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО	···.								
МТ									
NE									
NV									
NH	-								
NJ									
NM							<u> </u>		"
NY									
NC									!
ND									
ОН									
ОК									
OR									
PA									
RI									
SC SD		X	\$841,250.00	44	\$225,000.00	0	0		X
TN		х	\$841,250.00	2	\$50,000.00	0	0		X
TX									
UT									1
VT									
VA									
WA			,				<u>.</u>		
wv									
WI									
WY									
PR									